Lindsay (W. L.)

Mechanical Restraint in English Asylums.

By W. LAUDER LINDSAY, M. D., F. R. S. E.,
Physician to the Perth Royal Asylum, (Scotland).

[From the *American Journal of Insanity*, for April, 1879.]

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MECHANICAL RESTRAINT IN ENGLISH ASYLUMS.

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"Nullius in verba magistri."

I would follow up what I have already said on the subject of Restraint and Non-Restraint in the treatment of the insane,* by setting forth somewhat in detail:

I. The *actual* extent to which, and manner in which, mechanical restraint is at present used in the public and private asylums of England—that country which never ceases boasting of its model management of the insane and of hospitals for the insane.

II. When, in this hot-bed and headquarters of Conollyism, mechanical restraint is not employed, what are its *substitutes*, and what are the effects of the use of these substitutes.

III. And what generally are the results of the *non-use* in English asylums of mechanical restraint in cases in which the majority of experts throughout the world would deem it necessary.

In the first place I shall address myself to the questions, whether, to what extent, and in what forms, mechanical restraint is *actually* now employed in English asylums notwithstanding all the assertions of Conolly's admirers to the contrary.

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* *Vide:* I. "The Protection Bed and its Use," AMERICAN JOURNAL OF INSANITY, April, 1878, from the *Edinburgh Medical Journal*, February, 1878.

II. "The Theory and Practice of Non-Restraint in the Treatment of the Insane," AMERICAN JOURNAL OF INSANITY October, 1878, from the *Edinburgh Medical Journal*, April and June, 1878.

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It so happens that an important official utterance has recently been made on the subject—the alleged *non-use* of mechanical restraint in English asylums. The British government, with that morbid concern for the "liberty of the subjects," which so distinguishes it, thought fit, in 1877, to appoint a select committee to "inquire into the operations of the lunacy law so far as regards the security offered by it against violations of personal liberty." In July, of that year, the said committee, having meanwhile taken evidence, *de omnibus rebus et quibusdam aliis*, presented to Parliament a voluminous "report" of 587 pages folio, containing *inter alia* certain "minutes of evidence." These minutes of evidence give the opinions of all the leading authorities on "Lunacy Law" in the three kingdoms. But of those authorities the opinions and assertions of none carry with them anything approaching the weight of those of the veteran nobleman, who has so long presided over the English Board of Lunacy, viz.: The Right Honorable the Earl of Shaftesbury.

Of Lord Shaftesbury a contemporary English critic on "Lunacy Law Reform,"* speaks as "the great chief, to whose opinions no government can refuse deference." His is a "name illustrious on the roll of benefactors of the race of man," we are told. "It is scarcely possible to discuss any question in lunacy without reference, tacit or expressed, to the actions and opinions of the Earl of Shaftesbury. Before the actions of such a man, while still among us, criticism must be dumb, lest a temperate account may sound like adulation." Before a previous Parliamentary Committee (in 1859), he gave his evidence "with uncommon courage, knowledge and perspicuity."

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* In the *British Medical Journal* for April, 1879, pp. 566 and 604.

A Scotch critic on the same subject—Lunacy Law Reform in England—also refers to that "veteran and experienced philanthropist, the Right Honorable the Earl of Shaftesbury, who for twenty-five years has acted as chairman of the English Lunacy Board, and for nearly half a century, has been practically at the head of all English lunacy legislation."*

It is not surprising then that his lordship's statements on lunacy questions attract an attention and carry a weight, which they may not intrinsically deserve.

Now the Parliamentary Committee of 1877 were naturally curious concerning the burning question of restraint or non-restraint, and they accordingly made certain inquries thereon of the Noble Earl. His answers (which are printed on page 543 of the committee's report,† which, by the way, is a perfectly public or state document), contains the following intelligence, purporting to be partly matter-of-fact and partly matter-of-opinion, both in reply to query No. 11,335. The *fact* he alleges is this: "Mechanical restraint has been *abolished in every asylum* in the country; and see how well we go on?" The *opinion* which precedes the alleged fact is this: "If we ever go back to *any portion* of it, it will become universal, and matters will be *worse*‡ than they were before."

Let us leave the value of this *opinion* and of other opinions of the Noble Lord bearing on the same subject, until we have guaged the value of the *fact*, as he states it—that mechanical restraint in the asylums of Eng-

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* *Dundee Advertiser*, September 24, 1878.

† This report is generally known as the *Dillwyn* Report, or the report of the *Dillwyn* Committee, from the name of one of the leading members of the said committee. A great defect in such a report is the want of a full analytical *index*, such as that given by the late Sir James Coxe, in the *Scottish* Lunacy Commission Report of 1856.

‡ The italics in this and similar cases are, of course, mine.

land is a thing of the past. *If* the fact be as stated by him, the annual Blue Books of the English Lunacy Board, which are regularly signed by "Shaftesbury, chairman," ought to be a *tabula rasa* so far as concerns any record of mechanical restraint in English asylums—those patterns of superhuman excellence.

But confining myself to one of these Blue Books—the last or thirty-second which bears date August, 1878, and which therefore records the incidents in English asylums of 1877, I find no less than *one hundred and twenty-three cases* of mechanical restraint* reported as having occurred *in* a *single year*, in a limited number of the *public* asylums of England, under circumstances, that is, in which such restraint was least likely to be used. For it is not in the *public* asylums so much visited by lunacy commissioners that we look for a development of mechanical restraint, but among the insane who are not treated in asylums at all.† The details, however, concerning the one hundred and twenty-three cases of mechanical restraint in English asylums reported by "Shaftesbury, chairman," himself,‡ as having occurred in 1877 are of sufficient interest to merit tabulation and comment.

Table I. Showing the names and number of *public* asylums in which mechanical restraint was employed in 1877.

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* The *number* of cases, however, is not always specified by the registers, so that the numbers here given must be considerably short of the actual number.

† Of the 68,538 "registered patients" to whom the thirty-second Blue Book of the English commissioners refers, only 37,763 were in "county and borough asylums."

‡ He and "all whom it may concern" will find the details given in the following pages of the thirty-second Annual Report of the English Lunacy Board: 141, 151, 153, 155, 160, 165, 171, 179, 186, 199, 207, 214, 225, 235, 238, 258, 261, 265, 271, 274, 276, 279, 283, 287, 290, 295, 298, 299, 333, 335, 338, 342, 354, 355 and 365.

I. *County* Asylums:

1. Berks. 2. Cheshire, Macclesfield. 3. Cornwall. 4. Cumberland. 5. Derby. 6. Dorset. 7. Essex. 8. Hants. 9. Kent, Barming Heath. 10. Lancashire, Whittingham. 11. Middlesex, Colney Hatch. 12. Middlesex, Banstead.* 13. Northumberland. 14. Shropshire. 15. Somerset. 16. Sussex. 17. Warwick. 18. Wilts. 19. York, North Riding. 20. York, West Riding, Wakefield. 21. York, West Riding, Wadsley. 22. York, East Riding.

II. *Borough* asylums, registered *hospitals* and *state* asylums.

23. Birmingham. 24. Hull. 25. Ipswich. 26. City of London. 27. Newcastle-upon-Tyne. 28. Norwich, Infirmary Asylum. 29. Norwich, Bethel Hospital. 30. Earlswood, (for Idiots.) 31. Yarmouth, (for sailors.) 32. Royal India Asylum, (for soldiers.) 33. Leavesden, (for adult imbeciles.)

Table II. Showing the assigned *reasons* for the application of mechanical restraint.

1. "To prevent her picking her face during an attack of erysipelas."

2. "To prevent self-injury whilst suffering from erysipelas."

3. "At night to prevent the constant attempts at self-injury."

4. "To prevent his carrying out persistent efforts to tear open the sutures of the wound in a case of cut-throat."

5. "Exceptionally violent, homicidal, and suicidal tendencies. He made a most desperate attempt to kill himself by beating his head against the wall." By no means an uncommon occurrence in "non-restraint" asylums where grevious wailing is made over the so-called "accidents" that every now and again happen under the supposed benevolent "system" of treatment.

6. "*Necessitated*"—say the commissioners themselves—"by her violent and determined suicidal impulse."

7. "To prevent him from putting his fingers down his throat to cause vomiting."

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* Probably it is the influence of Conollyism and of tradition that leads to such a marked diversity in practice between the public asylums of the same county, Hanwell being still conspicuous for its *non-use* of mechanical restraint.

8. "To prevent self-mutilation."
9. "To prevent self-injury."
10. "To prevent her picking her face."
11. "To prevent picking her head."
12. "Murderous propensities."
13. "Suicidal impulses of a very dangerous description."
14. "For controlling maniacal excitement."
15. "Violence."
16. "Destructiveness."
17. "Destructive habits."
18. "To control destructive habits."
19. "To prevent removal of dressings and bandages."
20. "Fractured her thigh in a fall."
21. "Strong and troublesome."

Table III. Showing the *forms* of mechanical restraint employed.

1. "Strait-waistcoat."
2. "Camisole."*
3. "Polka with sleeves attached."
4. "Hands fastened to the sides of the bed by cotton bands."
5. "Kept in her chair by means of a strap passed loosely round her waist."
6. "Hands loosely tied down by flannel bandages whilst in bed."
7. "Hands loosely fastened."
8. "Hands secured by means of the sleeves of a strong dress being sewed up below them and secured either behind her back or to her side."
9. "Sleeves."
10. "Fastened in bed" at night.
11. "Packing in wet sheets."
12. "Dry packing.
13. "Soft gloves."
14. "Gloves."
15. "Hands tied."
16. "Arms confined."

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*Moreover the Camisole would appear to be, or to have recently been (in 1876), placed at the command of the ordinary attendants in some of the highest-class asylums in England for the affluent insane, *e. g.*, the Manor House, (London), and Coton Hill, (Stafford; 30th Report of Commissioners, p. 295, and 31st, p. 108.

Table IV. Showing the *duration* of the application of mechanical restraint.

1. Forty-seven weeks. 2. One hundred and three days. 3. Five and one-half weeks. 4. Eighteen days. 5. Thirty-eight hours. 6. One day. 7. Ten hours. 8. "Through the night."

Table V. Showing the *number of cases* of mechanical restraint in each asylum.

1. In one asylum, sixteen cases—that is instances of its application in some of the forms mentioned in Table III. 2. In one asylum, thirteen cases. 3. In one asylum, ten cases. 4. In three asylums, seven cases. 5. In nine asylums, four cases. 6. In three asylums, three cases. 7. In five asylums, two cases. 8. In eight asylums, one case.

Table VI. Showing the general *reputation* or character of the asylums in which, or the physicians by whom, mechanical restraint is employed.

1. *Whittingham*: "We have great pleasure in thus recording our opinion* of these proofs of the continued energy and ability of the medical superintendent in promoting the best interests of the Institution, and the welfare of its inmates."

2. *Wakefield*: "We have much pleasure in recording our opinion that this important Asylum continues to maintain its high position, and that it is managed with great efficiency and ability."

3. *Sussex:* "We have much pleasure * * * in reporting that the condition of the Asylum and the manner in which the patients appear to be treated reflect great credit on the committee of visitors and the medical superintendence."

4. *Derby:* "We are glad to be able to report very favorably of the condition of the asylum and of the skill and energy displayed in its management."

5. *Essex:* "We are glad to have this opportunity of again expressing a very favorable opinion as to the management of

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* The English Lunacy Commissioners make their official visits in couples, one of the two being a physician and the other a barrister. Hence "our opinion represents a conjoined medical and legal one, that of both a medical and legal lunacy commissioner."

this Asylum, and of the *kindness** with which the patients are treated."

6. *Hants:* A similar testimony is given.

7. *Royal India Asylum:* "The condition of this asylum continues to reflect great credit upon the management of Dr. Christie."

8. *Yarmouth:* "We have the pleasure of repeating the opinion expressed on many former occasions that this hospital is managed with ability, and the good treatment and comfort of its inmates are well provided for."

9. *Earlswood:* "We have much pleasure in reporting that the good organization is everywhere maintained, and that the condition and management of the Institution are most creditable to the authorities."

10. *Northampton:* Too, "continues to be managed with the same ability and zeal for the welfare of the inmates, which we have been able to report on former occasions."

11. *Bethel Hospital:* "We have again the pleasure of expressing our opinion of the *kindness* with which these patients are treated, and of the zeal which is shown for their welfare."

12. *Macclesfield:* "We entertain a favorable opinion of the condition of this Asylum."

13. *Berks:* Is "managed with skill and success."

14. *Cornwall:* Its condition is ascribed "to the careful and intelligent management of Dr. Adams."

This last table effectually disposes of the equally uncharitable and ridiculous assertions, made by Dr. Conolly and Lord Shaftesbury, or their admirers, as to the necessary connection between the use of mechanical restraint, and the reign of harshness or cruelty. For here we have the Lunacy Commissioners, themselves, impregnated as they have been with Conollyism for the last twenty-five years at least, proving officially that various forms of mechanical restraint are employed at the present day, in those English asylums that bear the highest reputation at Whitehall, by those physi-

* I venture to call special attention to this word *kindness* in reference to the vaticinations of its opposite *cruelty*, so freely ascribed by Conolly or his satellites to *all* employers of mechanical restraint in whatever form or degree.

cians, who are by habit and repute, distinguished for their *humane*, as well as successful management.*

In short an analysis of such a Blue Book of the English Lunacy Commissioners,† directed to the discovery of the extent to which mechanical restraint really prevails in the treatment of the insane in England, should, once for all, explode the absurdities and tyrannies of Conollyism, by demonstrating that the most humane and experienced physicians in England consider the *most humane treatment* of the insane, in certain exceptional conditions, to be mechanical restraint.

In the face of such facts as are to be found embodied in such a British Government Blue Book, the continued assertion that the non-use of mechanical restraint is an essential feature in the modern "system" of treatment of the insane in England, which system is spoken of as the "non-restraint system," is worse than an absurdity; it is a mischievous perversion of facts—a deliberate misstatement of truth. But the statistics above quoted are very far from representing the extent to which mechanical restraint, in some of its forms, is really employed, at the present day, in the treatment of the insane in England.

The number of County Asylums in England is, ...	57
Of Borough Asylums, ...	8
Of Registered Hospitals, ...	20
Making a total of, ...	79

public asylums, to which exclusively the restraint

* Mechanical restraint is (or was in 1876), used at York, so long the headquarters of the Tukes, who are credited with the introduction of the "Humane" system of treatment into England.—[Thirtieth Report of Commissioners, p. 299.]

† If the reader take up, for instance their Thirtieth Annual Report, for 1876, he will find records of the application of mechanical restraint on pages 57, 70, 71, 134, 148, 150, 165, 168, 178, 192, 198, 202, 211, 217, 229, 238, 249, 245, 250, 256, 260, 270, 271, 277, 286, 287, 290, 295, 299 and 335.

statistics of the commissioners refer. But *private* asylums are more numerous in England, than these three classes of public asylums put together; they stand in the proportion of ninety-nine to seventy-nine.

If we assume that the proportion of cases of mechanical restraint to be found in a single year, in *private* asylums, is not likely to be greater than that which characterizes public ones, we have to add one hundred and fifty-four to one hundred and twenty-three, as representing the *probable* number of applications of mechanical restraint that occurred during 1877, in the *private* asylums of England.

With the present strong feeling of the public and of Parliament against *private* asylums,* it will be impossible, however, to get people to believe that the instances of mechanical restraint are not *greater* in private† than in public asylums. The probability, indeed, is that at least twice as many instances of the use of mechanical restraint occur, within a given period, in private, as in public asylums in England, simply because the facilities for its employment are at least twice as great, and the chances of non-detection twice as numerous. Here is a sketch by Lord Shaftesbury himself of the treatment of "single patients" in "private houses" in England. "I am quite sure the *cruelties* that are perpetrated when patients are so placed are *oftentimes* shocking. * * * * These attendants when they want to have a junket, and to go out for their amusement do this, * * * * they *strapped* (their patients) down *to the bed and left them* so twenty,

*There is, at present, a bill before Parliament, proposing to buy them all up so as to convert them into public or State inititutions.

†Of a patient in one of these private asylums, Dr. Bucknill tells us in the Select Committee's Report of 1877, p. 297—"He was tied in his bed and very badly treated." This was a "chancery patient," and chancery patients are as a rule, wealthy, and can command the best private asylum in England.

thirty or forty hours."* A pretty state of matters in a country that has, for a long series of years, had no less than *two* sets of well paid commissioners, with all the paraphernalia constituting boards, whose ostensible object it is to prevent lunacy abuses in England!

Besides, the public and private asylums of England do not harbor all its insane, while the probabilities of the applications of mechanical restraint are obviously greatest, by far, in the case of lunatics, imbeciles or idiots who have not the advantage of periodical inspection by Lunacy Commissioners or Chancery Visitors.

The relative distribution of "lunatics, idiots and persons of unsound mind," in England, on 1st January, was:

1.	In County and Borough Asylums,	37,763
2.	In Registered Hospitals,	2,778
3.	In Metropolitan Licensed Houses,	2,069
4.	In Provincial Licensed Houses,	2,133
5.	In Naval, Military Hospitals and Royal India Asylum,	360
6.	In Broadmoor Asylum, (for Criminal Lunatics),	482
7.	In Workhouses,	11,859
8.	In the Metropolitan District Asylums, (for the Chronic cases,)	4,406
9.	Residing with Relatives or others,	6,688
	Total,	68,538

Now a glance at this table renders it evident that mechanical restraint is to be looked for, in the first place, in class nine, among lunatics, idiots and persons of unsound minds, who are in no kind of asylums at all, and yet it is precisely of these six or seven thousand persons that we are told nothing by the commissioners; it is precisely these unprotected individuals that we

* Select Committee's Report, 1877, p. 566.

would expect to be the special objects of the State care, of the attentions of the Lunacy Boards of Whitehall and Lincoln's Inn.*

Nor do the commissioners tell us how restraint stands in *work-houses*,† or in private asylums.‡ Indeed they give us very little direct information as to the extent to which mechanical restraint is used in English asylums. But they give us the data for *inferring* a great deal. For if, as has been shown, one hundred and twenty-three cases of such restraint occur in *public* asylums only, in a single year; if, as has also been seen, this is held tantamount, by Lord Shaftesbury and other government authorities, to a total absence of a practice so dreadful in itself, so fraught with evil, not less to those who use it than to those upon whom it is used; if, as is probable, one hundred and fifty-four is to be taken as representing for private asylums one hundred and twenty-three cases in public ones, and if lastly we add the *probable* proportion of instances of mechanical restraint that occurred in 1877 among "lunatics, idiots

* Of the opinion of the medical press of England on the relative value of these boards, the following quotation from the *British Medical Journal*, of April 14, 1877, (p. 456), may suffice to give some idea: "The obvious remedy is an *amalgamation of the Boards* of Commissioners and Visitors in Lunacy, whereby one board for the visitation of all lunatics will be provided, too powerful to be placed under the feet of the Masters in Lunacy, and the absurd wasting of public money avoided, which is at present caused by the dual action of two sets of officials, discharging, practically the same duties. The Commissioners, and the Visitors, cost the country about £27,000 a year."

† Though not in the form of an "entry," similar to the "entries" made in the books of public asylums, we are told, (p. 85 of the thirty-second Annual Report), that in Headington Workhouse, restraint was resorted to *by steel handcuffs and by tying down in bed* for eigty-seven hours. Dr. Bridges, one of the Local Government Inspectors of London Workhouses, confessed to the Select Committee of 1877, (Report p. 147), that these houses possess *strait waistcoats* and other means of mechanical restraint.

‡ For their thirty-second report contains no "entries," whatever, relating to these places of custody or care. Nor is there any reference to such *public* asylums as those of Jersey or the Isle of Man.

and persons of unsound mind," boarded out in England, having no lunacy board supervision of any kind, and among the insane occupants of work-houses, it is obviously a very low estimate to put the total number of cases of mechanical restraint of insane persons in England alone, in the year 1877, at a minimum of *three hundred.*

Here, then, we have a couple of contemporary Blue Books, issued by the same government, relating to the same subject, and containing the official utterances of the same Noble Lord. In the one he tells us that—

I. "Mechanical restraint has been abolished in *every* asylum in the country," while in the other he furnishes us with ample evidence that—

II. Nevertheless, in 1877, *one hundred and twenty-three* instances of its use occurred in *thirty-four of its public* asylums alone!

Is it necessary after *such* a contrast between personal assertion or opinion and undeniable facts, to attach any value at all to Lord Shaftesbury's peroration on "The Greatest Discovery of Modern Times—The Non-Restraint system. * * * The greatest triumph of Science and Humanity that the world ever saw!"* I trow not; for such discoveries are

> "Chimeras all, and mere absurdities,"

as Dryden puts it; while according to Burns and men of common sense in general—

> "*Facts* are chiels that *winna ding*
> And need na be disputed."

"*Ad summam quicquid venit, ad Exitum prope est.*"
("Whatever comes to its height is near its end.")

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* Published on the same page of the Blue Book (p. 543) which contains his assertion, anent The Total Abolition of Mechanical Restraint.

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